

THOMAS J. VILSACK GOVERNOR SALLY J. PEDERSON LT. GOVERNOR

OFFICE OF DRUG CONTROL POLICY

Marvin L. VanHaaften, DIRECTOR

Governor's Office of Drug Control Policy Five-Year Strategic Plan

July 1, 2003 - June 30, 2008

OVERVIEW

The Office of the Drug Policy Coordinator is established in Chapter 80E of the Code of Iowa. The Coordinator directs the Governor's Office of Drug Control Policy; coordinates and monitors all statewide counter-drug efforts, substance abuse treatment grants and programs, and substance abuse prevention and education programs; and engages in other related activities involving the Departments of public safety, corrections, education, public health, and human services. The coordinator assists in the development of local and community strategies to fight substance abuse, including local law enforcement, education, and treatment activities.

The Drug Policy Coordinator serves as chairperson to the Drug Policy Advisory Council. The council includes the directors of the departments of corrections, education, public health, public safety, human services, division of criminal and juvenile justice planning, and human rights. The Council also consists of a prosecuting attorney, substance abuse treatment specialist, substance abuse prevention specialist, substance abuse treatment program director, judge, and one representative each from the Iowa Association of Chiefs of Police and Peace Officers, the Iowa State Police Association, and the Iowa State Sheriff's and Deputies' Association. Council members are appointed by the Governor and confirmed by the Senate.

The council makes policy recommendations related to substance abuse education, prevention, and treatment, and drug enforcement. The Council and the Coordinator oversee the development and implementation of a comprehensive State of Iowa Drug Control Strategy.

The Office of Drug Control Policy administers federal grant programs to improve the criminal justice system by supporting drug enforcement, substance abuse prevention and offender treatment programs across the state. The ODCP prepares and submits the Iowa Drug and Violent Crime Control Strategy to the U.S. Department of Justice, with recommendations from the Drug Policy Advisory Council. The ODCP also provides program and fiscal technical assistance to state and local agencies, as well as program evaluation and grants management.

MISSION STATEMENT

• The Mission of the Governor's Office of Drug Control Policy is to serve as a leader and a catalyst for improving the health and safety of all Iowans by promoting strategic approaches and collaboration to reduce drug use and related crime.

VISION STATEMENT

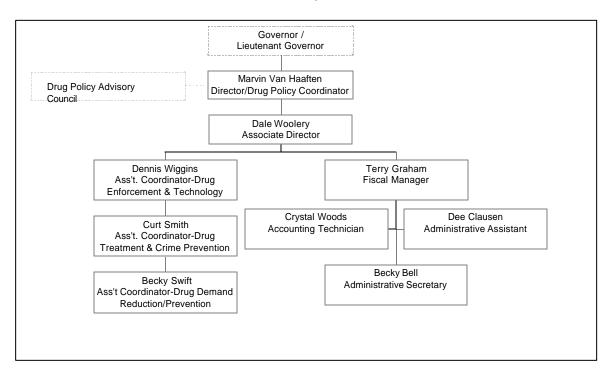
 The Vision of the Governor's Office of Drug Control Policy is to empower Iowa citizens, organizations, and policy makers to cultivate safe and drug free communities.

GUIDING PRINCIPLES

- Accountability
- Collaboration
- Coordination
- Customer Service
- Effectiveness

- Efficiency
- Fairness
- Honesty
- Innovation
- Leadership

TABLE OF ORGANIZATION (effective July 1, 2003)

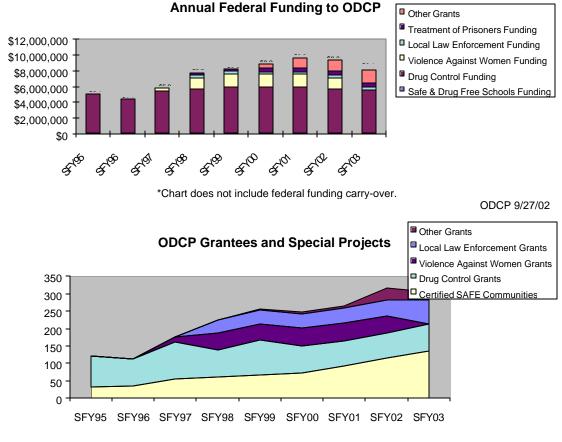


ASSESSMENT: Internal Strengths

The Office of Drug Control Policy is a small independent agency with the flexibility to minimize hierarchy and bureaucracy. This provides a consumer/constituent friendly environment conducive to customer service and the collaborative development of effective strategies to respond efficiently to current and emerging needs. While working with several organizations to initiate and coordinate policies and programs that address the complexities of substance abuse and drug trafficking, ODCP also administers federal grant funds in a highly credible and fundamentally fair manner for eligible local and state agencies. ODCP takes a leadership role in alerting the public to important substance abuse and drug trafficking issues, and is a reliable information source for policy makers.

ASSESSMENT: Internal Limitations

Although Iowa Code requires ODCP's director (and by extension ODCP) to coordinate and monitor public fund expenditures by other state departments that provide substance abuse or drug enforcement services, ODCP's director has no authority over the use of funds appropriated to other agencies. An on-line grants management system, to streamline procedures and allow for increased on-site project monitoring, is not yet in place. Training needs for professional staff development exceed opportunities.



ODCP 9/27/0

^{*}The STOP Violence Against Women program was transferred to the Attorney General on July 1, 2002. *Proposed for 7-1-03: Transfer of Iowa SAFE Community program to Iowa Department of Public Health

External Needs:

Drug use is a preventable behavior. Drug (i.e. alcohol, tobacco and other drugs) addiction is a treatable disease. While the "drug of choice" may change over time, substance abuse is a constant concern. Alcohol remains the most prevalent substance of abuse in Iowa. However, in recent years an increasing number of Iowans have turned to using, manufacturing and/or selling marijuana and methamphetamine.

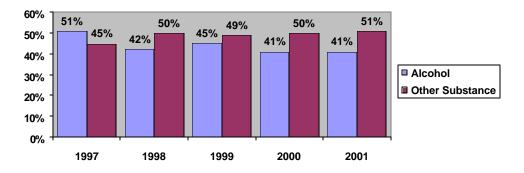
Primary Substance of Abuse for Clients Screened/Admitted to Substance Abuse Treatment

Year	Alcohol	Marijuana	Methamphetamine	Crack	Heroin	Other	Total
							Clients*
1992	85%	7.0%	1.0%	5%	0.5%	1.5%	22,471
1993	82%	9.0%	1.3%	5%	0.7%	2.0%	22,567
1994	78%	11.0%	2.2%	6%	0.8%	4.0%	25,328
1995	69%	14.3%	7.3%	6%	0.7%	2.7%	29,377
1996	64%	18.1%	9.1%	6%	0.5%	1.8%	33,269
1997	62.5%	19.3%	9.6%	6.3%	0.6%	1.7%	38,297**
1998	60%	20%	12%	6%	0.5%	1.5%	38,347**
1999	63%	20%	8.3%	5.6%	0.5%	1.3%	40,424**
2000	62.3%	20.9%	9.4%	5.4%	0.5%	1.5%	43,217**
2001	60.5%	22.2%	10.7%	4.6%	0.5%	1.5%	44,147**

^{*} Number of clients identifying a primary problem.

Source: Iowa Department of Public Health

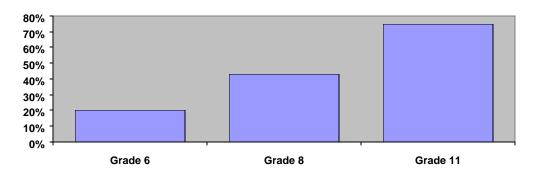
Incoming Prison Inmates Reporting a Primary Use of Alcohol & Other Substances, SFY 1997 - 2001



Source: Iowa Department of Corrections

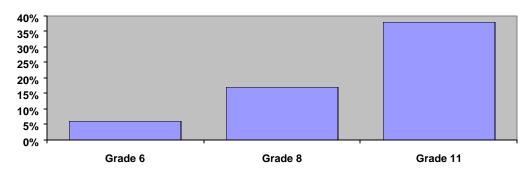
^{**} Number of clients reporting a primary drug problem is higher than total clients seen, because a client may be readmitted with another primary drug of choice.

Percent of Students Reporting "Ever" Having Used Alcohol, 1999



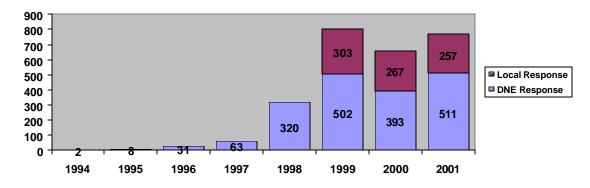
Source: Iowa Youth Survey

Percent of Students Reporting "Ever" Having Used Drugs, 1999



Source: Iowa Youth Survey

Clandestine Methamphetamine Laboratory Responses, CY 1994 – 2001



Source: Iowa Department of Public Safety

CORE FUNCTIONS

• Coordination of Efforts

(Facilitate an integrated statewide response to drug trafficking and substance abuse.)

• Grants Management

(Procure and administer federal grant programs to enhance drug and violent crime control initiatives at the state and local levels.)

• Public Policy & Education

(Educate the public about emerging substance abuse issues, and advise elected officials on policy matters.)

Goal # 1	Measures	Strategies		
Enhance coordination and leadership to improve Iowa's response to drug use and related crime.	% of state agencies addressing substance abuse prevention and treatment, drug control, and related crime that participate in the development	Develop and implement a comprehensive statewide drug control strategy annually to coordinate efforts and enhance the coordination of resources		
	and implementation of Iowa's Drug Control Strategy.	between state, federal, and local agencies. (reference: http://www.state.ia.us/governm		
	Percent of ODCP grant awards to state and local agencies for	ent/odcp/about/index.html).		
	initiation of new programs.	Initiate innovative approaches and embed promising or		
		proven techniques to reduce the supply of and demand for illegal drugs.		
Goal #2	Measures	Strategies		
Improve the ability of state and local government, and private partners, to comprehensively address the	Percent of Iowa counties receiving federal grant funds and/or other forms of assistance from ODCP.	Maintain performance-based grant incentives and increase site monitoring/assistance.		
continuum of substance abuse and drug control.	Percent of ODCP grant-funded programs sufficiently meeting objectives to warrant	Increase outreach to local law enforcement agencies in rural communities.		
	continued grant funding in a competitive environment.	Survey communities to assess awareness and emerging needs. Negotiate nonstate		
	Value of private donations to anti-drug public service campaign.	resources to meet those needs.		